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						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATT	ORNEY DOCKET NO.	CONFIRMATION NO.
10/003,791	11/15/2001		Carsten Guenther	DI	E9-2000-0033 (268)	4874
TITLE OF INVENTION	: METHOD AND SYST	TEM FOR GATHERING	INFORMATION BY VO	ICE INPUT		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1400	\$300	\$0	\$1700	11/16/2006
EXAM	INER	ART UNIT	CLASS-SUBCLASS	]		
MCFADDEN,	SUSAN IRIS	2626	704-275000	-		
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the		1AKERMAN	SENTERFITT
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		registered attorney or	le firm (having as a men agent) and the names of	`up to		
		2 registered patent atto listed, no name will be	orneys or agents. If no na	ame is 3		
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)		
PLEASE NOTE: Uni	ess an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the p	atent. If an assignee is	identified below, the de	ocument has been filed for 10003791
(A) NAME OF ASSI			(B) RESIDENCE: (CITY			16803/31
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED C	ON THE PATENT (print or type)
	gnee data will appear on the patent. If an assignee is identified below, the document has been filed for NOT a substitute for filing an assignment 19/25/2006 HAHHED2 00000127 500951 10003791
(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY) 01 FC: 1501 1400.00 DA
INTERNATIONAL BUSINESS MACHINES COR	92 FC+150A 300 G0 D0
Picase check the appropriate assignee category or categories (will not b	be printed on the patent): 🗖 Individual 🖼 Corporation or other private group entity 📮 Government
4a. The following fee(s) are submitted:  X Issue Fee	4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.
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Advance Order - # of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0951 (enclose an extra copy of this form).
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Authorized Signature Pull Q. H	Date OCTOBER 15, 2006

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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RICHARD A. HINSON

47,652

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are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/003,791 **TRANSMITTAL** Filing Date 11/15/2001 First Named Inventor **FORM GUENTHER** Art Unit 2626 **Examiner Name** MCFADDEN, SUSAN IRIS (to be used for all correspondence after initial filing) Attorney Docket Number DE9-2000-0033 (268) Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)							
	Amendman A A Extension Express A	smittal Form ee Attached ent/Reply fter Final ffidavits/declaration(s) n of Time Request Abandonment Request on Disclosure Statement Copy of Priority nt(s)	Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund  CD, Number of CD(s)  Landscape Table on CD  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Proprietary Information  Other Enclosure(s) (please Identify below):  FEE ADDRESS INDICATION				
	Incomple R	Missing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53					
		SIGNA	ATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm N	Firm Name  AKERMAN SENTERFITT						
	Signature Richard R. H.						
	RICHARD A. HINSON						
Date OCTOBER 16, 2006			Reg. No. 47,652				
CERTIFICATE OF TRANSMISSION/MAILING							

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